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TITLE: Non-Traditional Community-Based HIV Prevention Counseling and Testing Program

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ISSUE: The Guilford County Department of Public Health's Non-Traditional HIV Counseling and Testing Program (NTS) was developed in 1995 in response to the Plan to Reduce Barriers to Confidential HIV Testing, developed by the North Carolina AIDS Advisory Council. In response to community feedback, services were expanded in 1997 to further reduce barriers to confidential testing and increase access to HIV/syphilis screening to those most at risk for infection.

SETTING: Guilford County, North Carolina is a primarily urban county, with a population of 370,000. The county has been experiencing a syphilis epidemic since 1996 (rate of 64 cases per 100,000), and HIV cases have also been increasing. HIV and syphilis screenings are conducted regularly at three community-based organizations (CBOs) and one homeless shelter in the county. In addition, special neighborhood-based events are held at least 12 times per year in areas identified by CBO outreach staff as places where persons engage in risky behavior for HIV/STDs.

PROJECT: The NTS Program has two parts: 1) HIV and syphilis prevention counseling and testing are conducted at 4 fixed sites in the county, 3 CBOs and 1 homeless shelter, twice a month at 3 sites and weekly at 1 site, mostly during evening hours. 2) Special events are community-based screenings that include HIV and syphilis testing conducted in neighborhoods and at bars, and are usually offered in conjunction with other health screening services (such as blood pressure screening) to reduce the stigma associated with testing for HIV/STDs. At least 12 of these special events are conducted throughout the year in collaboration with local CBOs, who identify the location and time they want to hold the event, build community support for the event, and help the Health Department staff to register and counsel clients.

RESULTS: In the last fiscal year, 667 HIV and syphilis tests were provided in over 10 different community settings. The NTS Program has provided testing for a higher proportion of individuals with reported risk factors for HIV/STD infection than the Health Department's traditional STD clinic. For example, 8% of NTS clients reported injecting drug use, compared to 2% of clients at the STD clinic. Men having sex with men were also reported at a higher rate in the NTS Program than the STD clinic. Higher HIV positivity rates at the NTS Program (2.6%) than at STD clinic (1%) are also an indication that this program has increased accessibility to those people who need these services the most.

LESSONS LEARNED: The NTS program has evolved over the past four years. The most important lesson learned has been the need to be flexible. For example, sites have been added and moved, and hours have been changed to make services most accessible to community members. Collaboration with community partners to build community support and trust is the most crucial element to this program. The other key pieces include street outreach to publicize clinics and events, well-timed publicity, and committed staff.

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